## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 5 0 0 2 9 0

| 1   |  | CLAIMS   | AS FILED                   | - PART                                      | ı                           |                                    |       |                    |  |          |                    |                        |
|---|--|--|----------------------------|---|-----------------------------|------------------------------------|-------|--------------------|--|----------|--------------------|------------------------|
|   |  |  | (Colu                      | umn 1)                                      | (Column 2)                  |                                    |       | SMALL E            | YTITY  | OF       |                    | R THAN<br>L ENTITY     |
| U.S. NATIONAL STAGE FEES  |  |  |                            |   |                             |                                    | 7     | RATE               | FEE  | 7        | RATE               | FEE                    |
| ВА  | SIC FEE  |  | SMALL EI                   | NT. = \$ 150                                | LAI                         | RGE ENT. = \$ 300                  | 7     | BASIC FEE          | <del></del> -                                    |          | R BASIC FEE        | 979                    |
| EX  | AMINATION I                                    | FEE  |                            | F Article 33(1)-<br>50 / \$ 100             | Ali                         | other situations = \$ 100 / \$ 200 | 1     | EXAM. FEE          | -  | $\dashv$ | EXAM. FEE          | 100                    |
| SE  | ARCH FEE                                       |  | U.S. is ISA =<br>ALL other | = \$ 50 / \$ 100<br>countries =<br>/ \$ 400 | All                         | other situations = \$7250 / \$ 500 | 1     | SEARCH FEI         | =  |          | SEARCH FEE         |                        |
| FEI   | FOR EXTRA                                      | SPEC. PGS.   |                            | minus 100 =                                 |                             | / 50 =                             | 1     | X \$ 125 =         | :  | 1        | X \$ 250 =         | -                      |
| TO.   | TAL CHARGE                                     | ABLE CLAIMS  | .60                        | ninus 20 =                                  |                             |                                    | 1     | X \$ 25 =          | <del>                                     </del> | OR       |                    |                        |
| IND   | EPENDENT C                                     | CLAIMS   | 1                          | minus 3 =                                   | *                           |                                    | 1     | X \$ 100 =         |  | OR       |                    | +                      |
| MU  | TIPLE DEPE                                     | NDENT CLAIM PF   | RESENT                     |   |                             |                                    | 1     | + \$ 180 =         | <del> </del>                                     | OR       | + \$ 360 =         | <del> </del>           |
| • If  | the difference                                 | e in column 1 is   | less than ze               | ro, enter "0                                | " in c                      | olumn 2                            | j     | TOTAL              | <del> </del>                                     | OR       | TOTAL              | <del> </del>           |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST |  |  |                            |   |                             |                                    | •     | SMALL              | ENTITY   | OR       | OTHER<br>SMALL     |                        |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT  |                            | HIGHE<br>NUMB<br>PREVIOU<br>PAID F          | ER<br>USLY                  | PRESENT<br>EXTRA                   |       | RATE               | ADDI-<br>TIONAL<br>FEE                           |          | RATE               | ADDI-<br>TIONAL<br>FEE |
| NON   | Total  | *  | Minus                      | **  |                             | =                                  |       | X \$ 25 =          |  | OR       | X \$ 50 =          |                        |
| AME   | Independent                                    | *  | Minus                      | ***   |                             | =                                  |       | X \$ 100 =         |  | OR       | X \$ 200 =         |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                            |   |                             |                                    |       | + \$ 180 =         |  | OR       | + \$ 360 =         | <b></b> -              |
|   |  |  | -                          |   |                             |                                    | ٠     | TOTAL ADDIT.       |  | OR       | TOTAL ADDIT.       |                        |
|   |  | (Column 1)   |                            | (Columr                                     |                             | (Column 3)                         | _     |                    |  |          |                    |                        |
|   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                            | NUMBE<br>PREVIOU<br>PAID FO                 | R<br>SLY                    | PRESENT<br>EXTRA                   |       | RATE               | ADDI-<br>TIONAL<br>FEE                           |          | RATE               | ADDI-<br>TIONAL<br>FEE |
|   | otal   | *  | Minus                      | **  |                             | =                                  |       | X \$ 25 =          |  | OR       | X \$ 50 =          |                        |
|   | ndependent                                     | *  | Minus                      | ***   |                             | =                                  |       | X \$ 100 =         |  | OR       | X \$ 200 =         |                        |
|   | FIRST PRESI                                    | ENTATION OF MU   | JLTIPLE DEPE               | NDENT CL                                    | AIM                         |                                    |       | + \$ 180 =         |  | OR       | + \$ 360 =         |                        |
|   |  |  |                            |   |                             |                                    | ٦     | OTAL ADDIT.<br>FEE |  | OR T     | OTAL ADDIT.<br>FEE |                        |
| - If:   | the "Highest Nur<br>the "Highest Nur           | nn 1 is less than the<br>nber Previously Paid<br>nber Previously Paid<br>ber Previously Paid F | For" IN THIS SPA           | ACE is less that<br>ACE is less that        | an '20',<br>an '3' <i>e</i> | enter "20".<br>enter "3"           | the a | appropriate boy    | in column 1                                      |          |                    |                        |